

BC 10-20-00

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | MA | 70811 | 9/28 |
| O.I.P.E. CLASSIFIER | | 19 | 10-25-00 |
| FORMALITY REVIEW | AB | IC 900 | 10-25-00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral) Canceled A Appeal
+ Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|----------|
| 1 | ✓ | ✓ | 02/15/02 |
| 2 | ✓ | ✓ | 07/26/02 |
| 3 | ✓ | ✓ | 04/15/03 |
| 4 | ✓ | ✓ | 10/15/03 |
| 5 | ✓ | ✓ | 04/15/04 |
| 6 | ✓ | ✓ | |
| 7 | ✓ | ✓ | |
| 8 | ✓ | ✓ | |
| 9 | ✓ | ✓ | |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)